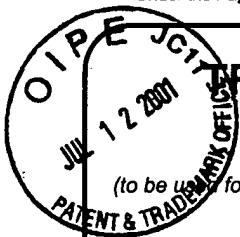


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Approved for use through 10/31/2002. OMB 0651-0031

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Total Number of Pages in This Submission

14

Application Number	09/832,685
Filing Date	April 10, 2001
First Named Inventor	Reddy, Srinivas et al.
Group Art Unit	2819
Examiner Name	D. Chang

Attorney Docket Number

015114045720

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP J. Matthew Zigmant	Reg No. 44,005
Signature		
Date	July 9, 2001	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

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	Date	July 9, 2001	

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PA 3155736 v1

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

AMOUNT OF PAYMENT (\$ 912)

Complete If Known

Application Number	09/832,685
Filing Date	April 10, 2001
First Named Inventor	Reddy, Srinivas et al.
Examiner Name	D. Chang
Group Art Unit	2819

Attorney Docket No. 015114-045720US

METHOD OF PAYMENT																																		
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="flex: 1; margin-right: 10px;"> <p>Deposit Account Number</p> <input type="text" value="20-1430"/> </div> <div style="flex: 1;"> <p>Deposit Account Name</p> <input type="text" value="Townsend and Townsend and Crew LLP"/> </div> </div> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>																																		
<p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>																																		
FEE CALCULATION																																		
<p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td></tr> <tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td></tr> <tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td></tr> <tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td></tr> </tbody> </table> <p style="text-align: right;">SUBTOTAL (1) <input type="text" value="(\$)"/></p>					Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101	710	201	355	Utility filing fee	106	320	206	160	Design filing fee	107	490	207	245	Plant filing fee	108	710	208	355	Reissue filing fee	114	150	214	75	Provisional filing fee
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<p>2. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>-20**</th> <th>=</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>9</td> <td>-3**</td> <td>6</td> <td><input type="text" value="\$80"/></td> <td><input type="text" value="\$480"/></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>X</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p style="text-align: right;">SUBTOTAL (2) <input type="text" value="(\$912)"/></p>					Total Claims	-20**	=	Extra Claims	Fee from below	Fee Paid	Independent Claims	9	-3**	6	<input type="text" value="\$80"/>	<input type="text" value="\$480"/>	Multiple Dependent			X	<input type="text"/>	<input type="text"/>												
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Multiple Dependent			X	<input type="text"/>	<input type="text"/>																													

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)					
Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
105	130	205	65	Surcharge - late filing fee or oath	<input type="text"/>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139	130	Non-English specification	<input type="text"/>
147	2,520	147	2,520	For filing a request for reexamination	<input type="text"/>
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215	55	Extension for reply within first month	<input type="text"/>
116	390	216	195	Extension for reply within second month	<input type="text"/>
117	890	217	445	Extension for reply within third month	<input type="text"/>
118	1,390	218	695	Extension for reply within fourth month	<input type="text"/>
128	1,890	228	945	Extension for reply within fifth month	<input type="text"/>
119	310	219	155	Notice of Appeal	<input type="text"/>
120	310	220	155	Filing a brief in support of an appeal	<input type="text"/>
121	270	221	135	Request for oral hearing	<input type="text"/>
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="text"/>
140	110	240	55	Petition to revive – unavoidable	<input type="text"/>
141	1,240	241	620	Petition to revive – unintentional	<input type="text"/>
142	1,240	242	620	Utility issue fee (or reissue)	<input type="text"/>
143	440	243	220	Design issue fee	<input type="text"/>
144	600	244	300	Plant issue fee	<input type="text"/>
122	130	122	130	Petitions to the Commissioner	<input type="text"/>
123	50	123	50	Petitions related to provisional applications	<input type="text"/>
126	180	126	180	Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
179	710	279	355	Request for Continued Examination (RCE)	<input type="text"/>
169	900	169	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify)					
The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3)	<input type="text" value="(\$)"/>

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SUBMITTED BY					
Complete (if applicable)					
Name (Print/Type)	J. Matthew Zigmant	Registration No. (Attorney/Agent)	44,005	Telephone	650-326-2400
Signature	<i>J. Matthew Zigmant</i>			Date	July 9, 2001